

| ISSUE CLASSIFICATION | |
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| Class | Subclass |
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U.S. UTILITY Patent Application

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| <p>MT O.I.P.E.</p> <p>SCANNED MT Q.A. AA</p> | PATENT DATE |
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| APPLICATION NO. | CONT/PRIOR | CLASS | SUBCLASS | ART UNIT | EXAMINER |
| 09/768816 | | 514 | 548 | 1614 | Bahar |

APPLICANTS

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Jean-Pierre Pelletier

1017

Treatment of pathological conditions characterized by an increased IL-1 level

PTO-2040
12/89

| ISSUING CLASSIFICATION | | | | | | | | | |
|------------------------------|--|----------|--|--------------------|-----------------------------------|--|--|--|--|
| ORIGINAL | | | | CROSS REFERENCE(S) | | | | | |
| CLASS | | SUBCLASS | | CLASS | SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | |
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| INTERNATIONAL CLASSIFICATION | | | | | | | | | |
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| <input type="checkbox"/> TERMINAL DISCLAIMER | DRAWINGS | | | CLAIMS ALLOWED | |
| | Sheets.Drwg. | Figs. Drwg. | Print Fig. | Total Claims | Print Claim for O.G. |
| <input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.. | _____ (Assistant Examiner) (Date) | | | NOTICE OF ALLOWANCE MAILED | |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____ _____ _____ | _____ (Primary Examiner) (Date) | | | ISSUE FEE | |
| | | | | Amount Due | Date Paid |
| <input type="checkbox"/> The terminal ____ months of this patent have been disclaimed. | _____ (Legal Instruments Examiner) (Date) | | | ISSUE BATCH NUMBER | |

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